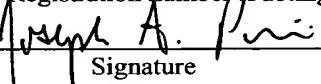




APPLICATION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 002566-024 (009000)											
<table border="1"> <tr> <td rowspan="2">CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</td> <td colspan="2">In re Application of Steven M. COHN, et al.</td> </tr> <tr> <td>Application Number : 09/903,257</td> <td>Filed: July 11, 2001</td> </tr> <tr> <td colspan="3">For: SYSTEM AND METHOD FOR ESTABLISHING BUSINESS TO BUSINESS CONNECTIONS VIA THE INTERNET</td> </tr> <tr> <td>Group Art Unit : 3627</td> <td colspan="2">Examiner: Maria Teresa Thein</td> </tr> </table>			CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	In re Application of Steven M. COHN, et al.		Application Number : 09/903,257	Filed: July 11, 2001	For: SYSTEM AND METHOD FOR ESTABLISHING BUSINESS TO BUSINESS CONNECTIONS VIA THE INTERNET			Group Art Unit : 3627	Examiner: Maria Teresa Thein	
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For: SYSTEM AND METHOD FOR ESTABLISHING BUSINESS TO BUSINESS CONNECTIONS VIA THE INTERNET													
Group Art Unit : 3627	Examiner: Maria Teresa Thein												
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.</p> <p>Signature: _____</p> <p>Name: _____</p>													
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p>													
<table> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)</td> <td>\$ <u>1,020.00</u></td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)</td> <td>\$ _____</td> </tr> </table>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)	\$ _____	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)	\$ <u>1,020.00</u>	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)	\$ _____												
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<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)	\$ _____												
<p><input type="checkbox"/> Applicant claims small entity status.</p> <p><input type="checkbox"/> A check to cover the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to <u>Deposit Account Number 19-2380</u>.</p>													
<p>I have enclosed a duplicate copy of this sheet.</p>													
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>													
<p>I am the <input type="checkbox"/> applicant/inventor</p>													
<p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p>													
<p><input type="checkbox"/> attorney or agent of record.</p>													
<p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>53,435</u>.</p>													
<p> Signature</p>													
<p>Joseph A. Parisi Typed or printed name</p>													
<p>January 5, 2006 Date</p>													
<p>(202) 585-8000 Telephone Number</p>													
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>													
<p><input type="checkbox"/> Total of _____ forms are submitted.</p>													

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